JPA/PO#

**Joint Personnel Agreement**

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| *DRI/VA (Prime Awardee) to UCD (Employer)*  *UCD (Prime Awardee) to DRI/VA (Employer)* | | New  Modification  Extension | | |
| **Section 1**  This agreement is between the Regents of the University of Colorado, a body corporate, for and on behalf of the University of Colorado Denver, a public institution of higher education created under the Constitution and the Law of the State of Colorado (“UCD”), the Denver Research Institute, a VA-affiliated non-profit research corporation (“DRI”), and the Eastern Colorado Healthcare System (“VA”) under the terms of the Master JPA Agreement signed May 14th, 2017 and as subsequently amended. The terms and conditions of the Master JPA Agreement shall govern this JPA. | | | | |
| **Section 2- Employee Information** | | | | |
| Name  Job Title:  Immediate Supervisor (Name and Title): | | Have you ever been on a mobility assignment?   * If Yes, date of each assignment (Month and Year) | | |
| Nature and Purpose of Agreement (as well as Responsibilities to be performed) | | | | |
| **Section 3 – Prime Awardee Detail** | | | | |
| Award Principal Investigator – | | | | |
| Project Title – | | | | |
| Budget Period From To | | CFDA # | | Award # |
| **Section 4 – Employer Detail** | | | | |
| Principal Investigator | | | | |
| Department | | | | |
| Regular Salary Source of employee named in section 2  UCD  DRI/VA | | | | |
| Rate of Basic Pay During Assignment: | | | | |
| **Agreement Period**  Start End | | | | |
| Budget # | UCD PO # | | UCD Routing # | |
| Budget Name | | | | |
| JPA % Effort |  | | | |
| JPA Salary Amount | **$** | | | |
| JPA Fringe Benefit | **$** | | | |
| Subtotal Direct Cost | **$** | | | |
| Administrative Fee (10%) | **$** | | | |
| **Total JPA Cost** | **$** | | | |
| **Signature:**   |  |  | | --- | --- | | **Prime Awardee** |  | |  | **Employer’s acceptance of the terms and conditions of this JPA and the Master JPA Agreement are acknowledged by Employer’s submission of invoices for costs under this JPA to the Prime Awardee.**  **Invoices must include JPA/PO#.** | | **Name       Date**  **Title**  **Inst.** | | | | | |